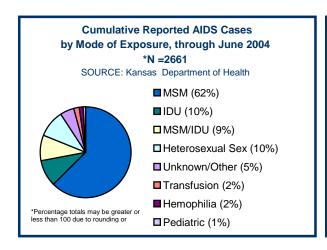
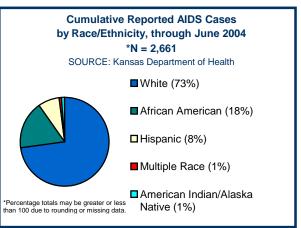


HIV/AIDS, STD & TB Prevention KANSAS

HIV/AIDS Epidemic

Kansas reported 2,659 cumulative AIDS cases to CDC as of December 2003.





Sexually Transmitted Diseases (STDs)

Syphilis

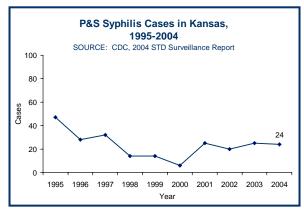
Primary and secondary (P&S) syphilis (the stages when syphilis is most infectious) remains a problem in the southern U.S. and some urban areas. In Kansas, the rate of P&S syphilis decreased 50% from 1995-2004.

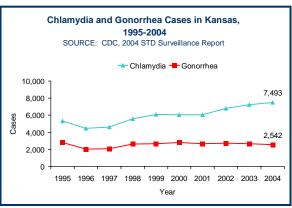
- Kansas ranked 34th among the 50 states with 0.9 cases of P&S syphilis per 100,000 persons.
- The number of congenital syphilis cases increased from 1in 1995 to 2 in 2004.



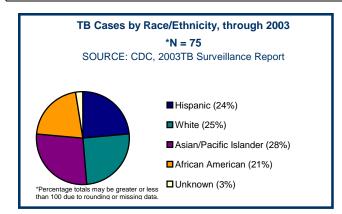
Chlamydial and gonorrheal infections in women are usually asymptomatic and often go undiagnosed. Untreated, these infections can lead to pelvic inflammatory disease (PID), which can cause tubal infertility, ectopic pregnancy, and chronic pelvic pain.

- Kansas ranked 35th among the 50 states in chlamydial infections (275.1 per 100,000 persons) and 23rd in the rate of gonorrhea infections (93.3 per 100,000 persons).
- Rates of chlamydia among Kansas women (451.1 cases per 100,000 females) were 4.7 times greater than those among Kansas men (96.1 cases per 100,000 males).





Tuberculosis



Although rates of tuberculosis (TB) infection in the U.S. have declined substantially since 1992, rates among foreign-born persons continued to increase. In 2003, Kansas reported

- ☐ The 30th highest rate of TB in the U.S.
- □ A total of 75 TB cases with 28% affecting Asian/Pacific Islanders and 25% affecting Whites. In all, about 59% were among foreign-born persons.

Program Initiatives Supported by CDC

HIV/AIDS

The primary goal of the Kansas Department of Health (DoH), Division of HIV Prevention, is to ensure effective prevention and care for HIV/AIDS and sexually transmitted diseases within the state. The Kansas DoH has developed an integrated and linked continuum of prevention and care services to support the state's prevention objectives and to provide qualitative data to illustrate the progress towards achieving the goals and objectives of the nation's HIV/AIDS prevention strategy.

National Center for HIV, STDs & TB Prevention Funding to Kansas, 2005 (US\$)	
HIV/AIDS	\$1,600,686
STDs	\$883,703
ТВ	\$355,370

Sexually Transmitted Diseases (STDs)

The Kansas STD Program effectively manages syphilis outbreaks by maintaining aggressive disease surveillance and intervention activities throughout the state. In 2004, two outbreaks accounted for 70% (26/37) of all early syphilis cases reported. The outbreaks, occurring in Wichita and Kansas City, involved two distinct at-risk behaviors. Because of a highly effective laboratory and provider surveillance system, as well as rapid disease intervention, 80% (21/26) of these cases were detected at their earliest stage of infection, a reflection of these elements working together effectively.

Tuberculosis (TB)

The Kansas TB Control Program continues to work with the state HIV-STD Program in order to ensure appropriate care for their patients. In recognizing the importance of identifying co-morbidity patients, the TB Control Program provided HIV counseling and testing training to state and local staff involved with TB patients. This has lead to an increase in ascertaining HIV status to 95% of TB cases in the priority 25-44 age group, and 80% of cases overall. The program will continue to stress to their partners in local health departments and other care providers the importance of determining the HIV status of their TB patients.

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